

471-000-505 Nebraska Medicaid Practitioner Fee Schedule for Chiropractic Services

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Code	Modifier	SFY Non-Facility Rate	SFY Facility Rate	Comments
72010		\$56.20		
72010	52	\$28.11		Single view
72040		\$30.70		
72040	52	\$15.36		Single view
72070		\$30.70		
72070	52	\$15.36		Single view
72100		\$32.66		
72100	52	\$16.34		Single view
98940		\$26.21	\$22.12	
98940	22	\$32.03	\$27.04	Initial visit only
98941		\$26.21	\$23.25	
98941	22	\$32.03	\$28.41	Initial visit only
98942		\$26.21	\$23.95	
98942	22	\$32.03	\$29.28	Initial visit only

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